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CONFIRMATION NO. 4926

<b>SERIAL NUMBER</b> 10/802,627	<b>FILING OR 371(c) DATE</b> 03/17/2004 <b>RULE</b>	<b>CLASS</b> 548 <i>514</i>	<b>GROUP ART UNIT</b> 1626	<b>ATTORNEY DOCKET NO.</b> 1662/63303
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## APPLICANTS

Igor Rukhman, Technion City, ISRAEL;  
Evgeni Flyaks, Kiriati-Bialik, ISRAEL;  
Tamas Koltai, Petah Tigva, ISRAEL;  
Judith Aronhime, Rehovot, ISRAEL;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/473,640 05/28/2003 and claims benefit of 60/455,286 03/17/2003 *fl*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

06/01/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY ISRAEL	SHEETS DRAWING 24	TOTAL CLAIMS 85	INDEPENDENT CLAIMS 27
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>CC</i> Initials			

## ADDRESS

26646

## TITLE

Polymorphs of valsartan *OK*

<b>FILING FEE RECEIVED</b> 4134	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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